2007 Health Plan Rate Table **Retirees (Eligibility Workers)** RETIREES NOT ENROLLED IN MEDICARE PPO PLANS **HEALTH MAINTENANCE PLANS** RETIREE Premier Premier Kaiser CIGNA **ENROLLMENT STATUS** Wellwise Sharewell Health Health Plan Plan Plan Plan RETIREE ONLY \$914.76 \$297.00 \$435.08 \$356.04 RETIREE W/1 DEPENDENT \$1,611.23 \$487.00 \$870.16 \$703.72 RETIREE W/2 OR MORE DEPENDENTS \$2,261.39 \$629.00 \$1,231.28 \$979.16 RETIREES ENROLLED IN MEDICARE RETIREE Premier Premier Kaiser **CIGNA ENROLLMENT STATUS** Wellwise Sharewell Health Health Plan Plan Plan Plan RETIREE ONLY Part B ONLY \$583.07 \$196.00 \$262.56 \$277.72 RETIREE ONLY Part A & B \$345.87 \$101.00 \$211.09 \$234.99 RETIREE W/1 DEPENDENT ONE W/ MEDICARE Part B ONLY \$1,497.83 \$492.00 \$697.64 \$647.43 ONE W/ MEDICARE Part A & B \$1,260.63 \$398.00 \$646.17 \$636.46 TWO W/ MEDICARE Part B ONLY \$1,166.13 \$391.00 \$525.12 \$548.90 TWO W/ MEDICARE Part A & B \$691.74 \$202.00 \$422.18 \$471.49 RETIREE W/2 OR MORE DEPENDENTS ONE W/MEDICARE Part B ONLY \$1.929.69 \$528.00 \$1.058.76 \$920.43 ONE W/MEDICARE Part A & B \$1,692.50 \$1.007.29 \$434.00 \$910.62 TWO W/ MEDICARE Part B ONLY \$533.00 \$886.24 \$832.26 \$1,816.29 TWO W/ MEDICARE Part A & B \$1,341.90 \$344.00 \$783.30 \$822.49

N0TE: Eligible Retirees and/or enrolled dependent age 65 or older must enroll in Medicare Part B. Eligible Retiree entitled to Medicare Part A without a premium must enroll in Medicare Part A. Evidence of Medicare coverage is required. For eligible retirees, the Retiree Medical Grant for 2007 is \$16.67 per month for each year of County Service to a maximum of 25 years.

IMPORTANT: For employees that retired on or after September 30, 2005, there is no Grant.